



PATENT
Attorney Docket No. ZAQ-001
(104816/159713)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Kersley et al.

SERIAL NUMBER: 10/016,172

ART UNIT: 2144

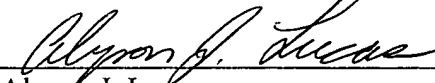
FILING DATE: December 6, 2001

EXAMINER: Pearson, Yvette B.

TITLE: System and Method for Verifying a Device

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any documents referred to as enclosed herein, are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 10th day of November, 2005.


Alyson J. Lucas

Commissioner for Patents
P.O. Box 1450
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Submitted herewith are:

1. Transmittal Form (1 pg.);
2. Change of Correspondence Address (1 pg.);
3. Power of Attorney /Revocation of Prior Powers and New Power of Attorney (1 pg.); and
4. Return Receipt Postcard.



TRANSMITTAL FORM

Application Serial Number	10/016,172
Filing Date	December 6, 2001
First Named Inventor	Kersley
Group Art Unit	2144
Examiner Name	Pearson, Yvette B.
Attorney Docket No.	ZAQ-001
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form (1 pg.) <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal	<input type="checkbox"/> Status Inquiry
<input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449	<input checked="" type="checkbox"/> Power of Attorney (Revocation of Prior Powers) (1 pg.)	<input checked="" type="checkbox"/> Return Receipt Postcard
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CORRESPONDENCE ADDRESS	SIGNATURE BLOCK
Direct all correspondence to: Patent Administrator Goodwin Procter LLP Exchange Place Boston, MA 02109 Tel. No.: (617) 570-1000 Fax No.: (617) 523-1231 Customer No. 051414	Respectfully submitted, Date: November 9, 2005 Reg. No. 50,389 Tel. No.: (617) 570-1408 Fax No.: (617) 523-1231 Robert S. Blasi, Esq. Attorney for the Applicant Goodwin Procter LLP Exchange Place Boston, MA 02109